ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY



WS-03953A Bachmann Springs Utility Company - Sewer Division PO Box 9 Tombstone, AZ 85638

ANNUAL REPORT

RECEIVED

FOR YEAR ENDING

AZ CORPORATION COMMISSION DIRECTOR OF UTILITIES

12 31 2005

FOR COMMISSION USE

ANN05 05

entered

COMPANY INFORMATION

		G
Company Name (Business Name)Ba	acnmann Springs Utility	Company
Mailing Address P.O. Box 9		
(Street) Tombstone	AZ	85638
(City)	(State)	(Zip)
(520) 457-3100	(520) 457-3004	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address		
Local Office Mailing Address P.O. Bo (Street		
Tombstone	AZ	85638
(City)	(State)	(Zip)
(520) 457-3100	(520) 457-3004	1
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address		

MANAGEMENT INFORMATION

Management Contact:	Jay Boland		President
	(Name)		(Title)
P.O. Box 9	Tombstone	AZ	85638
(Street)	(City)	(State)	(Zip)
(520) 457-3100	(520) 457-3004		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell N	o. (Include Area Code)
Email AddressJBoland@	bachmannsprings.com	.,,	
On Site Manager:	Jay Boland		
	(Name)		
P.O. Box 9	Tombstone	AZ	85638
(Street)	(City)	(State)	(Zip)
(520) 457-3100	(520) 457-3004		
Telephone No. (Include Area Code) Fax No. (Include Area Code)	Pager/Cell No.	(Include Area Code)

Please mark this box if the above address(es) have changed or are updated since the last filing.

C. A. A. Richard L.	. Sallquist				
Statutory Agent: Richard L	(Name)				
1430 E. Missouri Ave.,	• •	Phoenix A	Z 85014		
(Street)	(City)	(State)	(Zip)		
(602) 224-9222	(602) 224				
Telephone No. (Include Area Code)	Fax No. (Include A	rea Code Pager/Co	ell No. (Include Area Code)		
Attorney: Richard L.	Sallquist (Name)				
1430 E. Missouri Ave.,	` ,	Phoenix, AZ	85014		
(Street)	(City)	(State)	(Zip)		
(602) 224-9222	(602) 224-				
Telephone No. (Include Area Code)	Fax No. (Include A	rea Code) Pager/Ce	ll No. (Include Area Code)		
Please mark this box if the above address(es) have changed or are updated since the last filing. OWNERSHIP INFORMATION					
Check the following box that applies to	your company:				
Sole Proprietor (S)	X C Cor	poration (C) (Other tha	nn Association/Co-op)		
Partnership (P)	☐ Subch	apter S Corporation (Z	(i)		
Bankruptcy (B)	Assoc	iation/Co-op (A)			
Receivership (R)	Limite	ed Liability Company			
Other (Describe)					
	COUNTIES SE	RVED			
Check the box below for the county/ies	in which you are certi	ficated to provide service			
П АРАСНЕ	X COCHIS	E	COCONINO		
☐ GILA	☐ GRAHA	M	GREENLEE		
☐ LA PAZ	☐ MARICO	DPA 🗌	MOHAVE		
☐ NAVAJO	☐ PIMA		PINAL		
☐ SANTA CRUZ	☐ YAVAPA	n \square	YUMA		
☐ STATEWIDE					

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	
No.	DECRIPTION	Cost	Depreciation	O.C.L.D.
		(OC)	(AD)	(OC less AD)
351	Organization			
352	Franchises			
353	Land and Land Rights			
354	Structures and Improvements			
355	Power Generation Equipment			
360	Collection Sewers – Force			
361	Collection Sewers – Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	TOTALS		-0-	

This amount goes on the Balance Sheet Acct. No. 108

CALCULATION OF DEPRECIATION EXPENSE

Acct.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
351	Organization			
352	Franchises			
353	Land and Land Rights			
354	Structures and Improvements			
355	Power Generation Equipment			
360	Collection Sewers – Force		•	
361	Collection Sewers - Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	TOTALS			-0

This amount goes on the Comparative Statement of Income and Expense Acct. 403

BALANCE SHEET

Acct		BALANCE AT BEGINNING OF	BALANCE AT END OF
No.	ASSETS	TEST YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
121			\$
131	Cash	Φ	4
132	Special Deposits		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS		
		\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$	\$
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$ -0-	\$ -0-

NOTE: Total Assets on this page should equal Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct		BALANCE AT BEGINNING OF TEST YEAR	BALANCE AT END OF YEAR
No.	LIABILITIES	TEST TEAK	TEAR
	CURRENT LIABILITES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	DEFERRED CREDITS		
252	Advances in Aid of Construction	\$	\$
253	Other Deferred Credits		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Other Paid in Capital		
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CAPITAL	\$ -0-	\$ -0-

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

No.			CURRENT YEAR
521	Flat Rate Revenues	\$	\$
522	Measured Revenues		
536	Other Wastewater Revenues		
	TOTAL REVENUES	\$ -0-	\$ -0-
	OPERATING EXPENSES		
701	Salaries and Wages	\$	\$
710	Purchased Wastewater Treatment	<u> </u>	
711	Sludge Removal Expense		
715	Purchased Power		
716	Fuel for Power Production	"	
718	Chemicals		
720	Materials and Supplies		
731	Contractual Services – Professional		
735	Contractual Services – Testing		
736	Contractual Services – Other		
740	Rents		
750	Transportation Expense		
755	Insurance Expense		
765	Regulatory Commission Expense		
775	Miscellaneous Expense		
403	Depreciation Expense		
408	Taxes Other Than Income		
408.11	Property Taxes		
409	Income Taxes		
	TOTAL OPERATING EXPENSES	\$ -0-	\$ -0-
	OTHER INCOME/EXPENSE		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income	Ψ	Ψ
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
42/		\$ -0-	\$ -0-
	TOTAL OTHER INCOME/EXPENSE	φ -υ-	φ -U-
	NET INCOME/(LOSS)	\$ -0-	\$ -0-

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1		 LOAN #2	2,	LOAN #3	3	LOAN #	4
Date Issued							<u></u>	
Source of Loan								
ACC Decision No.					***************************************		····	
Reason for Loan								
Dollar Amount Issued	\$ 		\$ 		\$ 		\$ 	
Amount Outstanding	\$ 		\$ 		\$ 		\$	
Date of Maturity							 	
Interest Rate	 	%		%		%	 	%
Current Year Interest	\$		\$ 		\$ 		\$ 	
Current Year Principle	\$ -0-		\$ -0-		\$ -0-		\$ -0-	

WASTEWATER COMPANY PLANT DESCRIPTION

TREATMENT FACILITY - NONE

TYPE OF TREATMENT					
(Extended Aeration, Step A					
Ditch, Aerobic Lagoon, And					
Trickling Filter, Septic Tank					
DESIGN CAPACITY OF (Gallons Per Day)	PLANI				
(Galions For Day)					
	LIFT ST	'ATION	FACILITIES	- NONE	
Tanadian	Qu	antity	Horsepower	Capacity Per	Wet Well
Location		Pumps	Per Pump	Pump (GPM)	Capacity (gals)
	<u>FC</u>)RCE !	MAINS -	NONE	
Size		Materi	al	Le	ngth (Feet)
4-inch					
6-inch					
				<u></u>	
	MANHOLES	- NOI	NE	<u>CLI</u>	EANOUTS
Туре	C	Quantity			Quantity
Standard					
Drop					

WASTEWATER COMPANY PLANT DESCRIPTION (CONTINUED)

COLLECTION MAINS -NONE

SERVICES - NONE

Size (in inches)	Material	Length (in feet)
4		
6		
8		
10		
12		
15		
18		
21		
24		
30		

Size (in inches)	Material	Quantity
4		
6		
8		
12		
15		

FOR THE FOLLOWING FIVE ITEMS, LIST THE UTILITY OWNED ASSETS IN EACH CATEGORY

SOLIDS PROCESSING AND HANDLING FACILITIES	
DISINFECTION EQUIPMENT (Chlorinator, Ultra-Violet, Etc.)	
FILTRATION EQUIPMENT (Rapid Sand, Slow Sand, Activated Carbon, Etc.)	
STRUCTURES (Buildings, Fences, Etc.)	
OTHER (Laboratory Equipment, Tools, Vehicles, Standby Power Generators, Etc.	

WASTEWATER FLOWS - NONE

MONTH/YEAR NUMBER OF (Most Recent 12 Months) SERVICES		TOTAL MONTHLY SEWAGE FLOW	SEWAGE FLOW ON PEAK DAY	

PROVIDE THE FOLLOWING INFORMATION AS APPLICABLE

Method of Effluent Disposal	
(leach field, surface water discharge, reuse, injection wells, groundwater	
recharge, evaporation ponds, etc.)	
Wastewater Inventory Number	
(all wastewater systems are assigned an inventory number)	
Groundwater Permit Number	
ADEQ Aquifer Protection Permit Number	
ADEQ Reuse Permit Number	
EPA NPDES Permit Number	

STATISTICAL INFORMATION

Total number of customers 0	
Total number of gallons treated 0	gallons

INCOME TAXES

For this reporting period, provide the following:		
Federal Taxable Income Reported	-0-	
Estimated or Actual Federal Tax Liability	-0-	
State Taxable Income Reported	-0-	
Estimated or Actual State Tax Liability		
Amount of Grossed-Up Contributions/Advances	::	
Amount of Contributions/Advances	-0-	
Amount of Gross-Up Tax Collected		
Total Grossed-Up Contributions/Advances		

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

May Kard	April 12, 2006
SIGNATURE	DATE
J. Jay Boland	President
PRINTED NAME	TITLE

COMPANY NAME	Bachmann	Springs	Utility	Company	YEAR ENDING 12/31/2005
CUMPANY NAME	Daciimaiiii	Shrinds	OLLILLO	Company	LEAR ENDING 12/31/2005

PROPERTY TAXES

PROPERTY TAXES					
Amount of actual property taxes paid during Calendar Year 2005 was: \$					
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.					
If no property taxes paid, explain why no Property					

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VERIFICATION AND SWORN STATEMENT Taxes

RECEIVED

	<u>Taxes</u>	AZ CORPORATION COMMISSION DIRECTOR OF UTILITIES
VERIFICATION		DIRECTOR OF UP
STATE OF	COUNTY OF (COUNTY NAME) COChise	OI UILITIES ION
STATE OF	NAME (OWNER OR OFFICIAL) TITLE	
I, THE UNDERSIGNED	J.Jay Boland - President	
OF THE	Bachmann Springs Utility Com	npany

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA **CORPORATION COMMISSION**

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2005

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

MY COMMISSION EXPIRES

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

Mara Votary Public - Arizona SIGNATURE OF OWNER OR OFFICIAL Cochise County Commission Expires (520) 457-3100 October 3, 2006 TELEPHONE NUMBER SUBSCRIBED AND SWORN TO BEFORE ME COUNTY NAME A NOTARY PUBLIC IN AND FOR THE COUNTY OF THAL THIS DAY OF .20 06 (SEAL) SIGNATURE OF NOTA 10-3-06

VERIFICATION AND

RECEIVED

	SWOR	N STATEMENT	Γ	APR 1 7 2006
	<u>Intrast</u>	ate Revenues Only	AZ CO	RPOD-
VERIFICATION			DIF	SECTOD - COMMIS
STATE OF	COUNTY OF (COUNT Cochise			RPORATION COMMISSION UTILITIES
T THE IMPEDSICAED	NAME (OWNER OR C	official)TITLE land - Preside	nt.	
I, THE UNDERSIGNED	COMPANY NAME	Tanu - Flestue	:11 C	
OF THE		Springs Utili	ty Company	7
DO SAY THAT THIS ANNUAL	UTILITY REPO	RT TO THE ARIZO	NA CORPOR	ATION COMMISSION
FOR THE YEAR ENDING	MONTH 12	DAY 31	YEAR 2005	
STATEMENT OF BY COVERED BY THIS IS SET FORTH, TO THE SWORN STATEMENT IN ACCORDANCE W 401, ARIZONA REVI OPERATING REVEN	USINESS AND REPORT IN RE BEST OF MY I ITH THE REQ ISED STATUTION IUE OF SAID	AFFAIRS OF S SPECT TO EACH KNOWLEDGE, IN UIREMENT OF T ES, IT IS HEREI UTILITY DERIVI	AID UTILITY AND EVER FORMATIO FITLE 40, AI IN REPORT	LETE AND CORRECT TY FOR THE PERIOD Y MATTER AND THING N AND BELIEF. RTICLE 8, SECTION 40- ED THAT THE GROSS ARIZONA INTRASTATE
UTILITY OPERATIO	<u>NS DURING CA</u>	LENDAR YEAR 2	005 WAS:	
		Arizona Intrastate Gr	oss Operating Re	venues Only (\$)
SANDRA L. WILSON Notary Public - Arizone Cochise County My Commission Expires October 3, 2006		(THE AMOUNT INCLUDES \$_IN SALES TAXE		OVE OR COLLECTED)
**REVENUE REPORTED ON THIS P. INCLUDE SALES TAXES BILLED OF COLLECTED. IF FOR ANY OTHER THE REVENUE REPORTED ABOVE AGREE WITH TOTAL OPERATING ELSEWHERE REPORTED, ATTAC STATEMENTS THAT RECONCILE DIFFERENCE. (EXPLAIN IN DETA	OR R REASON, TE DOES NOT G REVENUES TH THOSE THE IL)	SIGNATURE OF OWNER OR OFF (520) 457-31 TELEPHONE NUMBER	-	ard
A NOTARY PUBLIC IN AND FOR T	7	COUNTY NAME COC	hise	
THIS 4	h DAY OF	MONTH APRIC	, 20_0	6

(SEAL)

MY COMMISSION EXPIRES_

10-3-06

SIGNATURE OF NOTARY PUBLIC

VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE

RECEIVED

APR 1 7 2006

VERIFICATION

INTRASTATE REVENUES ONLY

Little				AZ CORPORATION COMMISSION DIRECTOR OF UTILITIES
STATE OF	county of (county name Cochise	ME)		DIRECTOR OF UTILITIES
I, THE UNDERSIGNED	name (owner or offici J.Jay Bola)	AL) nd		President
OF THE	Bachmann Sp	orings Uti	lity(Company
DO SAY THAT THIS ANNUA	L UTILITY REP	ORT TO THE	<u>ARIZO</u>	NA CORPORATION COMMISSION
FOR THE YEAR ENDING	1,101,111		O05	
PAPERS AND REC THE SAME, AND STATEMENT OF COVERED BY THIS	CORDS OF SAU DECLARE TO BUSINESS AND S REPORT IN R HE BEST OF MY	D UTILITY; HE SAME D AFFAIRS ESPECT TO	THAT TO BI OF S EACH	FROM THE ORIGINAL BOOKS, I HAVE CAREFULLY EXAMINED E A COMPLETE AND CORRECT AND UTILITY FOR THE PERIOD AND EVERY MATTER AND THING FORMATION AND BELIEF.
401 <u>.01</u> , ARIZONA I OPERATING REVI	REVISED STAT ENUE OF SAID FIONS RECEIT 2005 WAS:	TUTES, IT IS O UTILITY I VED FROM	HERE DERIVI RES HE AM	TITLE 40, ARTICLE 8, SECTION 40- ZIN REPORTED THAT THE GROSS ED FROM ARIZONA INTRASTATE IDENTIAL CUSTOMERS DURING
\$		IN	SALES	S \$0_ TAXES BILLED, OR COLLECTED
	EA VICE DELLED. WILSON - Arizona county on Expires	BEFORE ME	X ————————————————————————————————————	SIGNATURE OF OWNER OR OFFICIAL (520) 457-3100 TELEPHONE NUMBER NOTARY PUBLIC NAME SANDIAL W/LSON COUNTY NAME COChise MONTH APML .2006
(SEAL) MY COMMISS	ION EXPIRES \ ()-3-06	$x = \frac{1}{2}$	SIGNATURE OF NOTARY PUBLIC